

JUL 01 2005

Atty Docket No. 017622-000130US

PTO FAX NO.: 571-273-8300

ATTENTION: Mailstop AF

Group Art Unit 3764

**OFFICIAL COMMUNICATION
FOR THE PERSONAL ATTENTION OF
EXAMINER THANH, QUANG D**

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that the following documents in re Application of TONY REID
Application No. 10/725,837, filed December 1, 2003
for MULTIPLE SLEEVE METHOD AND APPARATUS FOR TREATING EDEMA AND
OTHER SWELLING DISORDERS
are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Number of pages being transmitted, including this page: 4

Dated: 1 July 2005

Nancy Pizzo
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Documents Attached

1. SB/21 - Transmittal Form (1 pg)
2. SB/22 - Petition for Extn of Time - 3 mos. (1 pg)
3. SB/31 - Notice of Appeal (1 pg)

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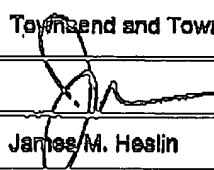
TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, Eighth Floor
San Francisco, CA 94111-3834
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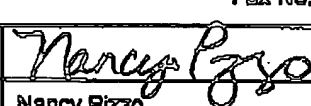
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PTO/SB/21 (09-04)

TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/725,837
	Filing Date	December 1, 2003
	First Named Inventor	Reld, Tony
	Art Unit	3764
	Examiner Name	THANH, QUANG D
Total Number of Pages in This Submission	Attorney Docket Number	017622-000130US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fees Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	James M. Heslin		
Date	1 July 2005	Reg. No.	28,541

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